

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>fw</i>	75331	
O.I.P.E. CLASSIFIER		<i>12</i>	<i>9/6</i>
FORMALITY REVIEW	<i>[Signature]</i>	71531	<i>10-31-07</i>
RESPONSE FORMALITY REVIEW		71531	<i>1-20</i>

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	
Original	
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Claim	Date
Final	
Original	
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Claim	Date
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If more than 150 claims or 10 actions
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